

### Montana E-File 2003 Test Packet

## **Montana Test 8**

Based on Federal Test 17

Form 2, Form 2a (itemized deductions)

Form W, Worksheet VI (Itemized deduction)
Form EST-P, Underpayment of Estimated Tax

Return Status: Tax Due

Name and SSN: De La Halo, Test R 400-00-6811 (primary)

Monday, Ruby 400-00-6812 (spouse)

Address: 615 Texas

Deer Lodge, MT 59722

Filing Status: (3) Married filing separate returns on same form

Residency: Full year resident

Exemptions: Total (2) - 1 regular 1 dependent (primary)

Total (7) - 1 regular 6 dependents (spouse)

Deduction: Itemized

Adj. Federal AGI: \$2,670 Unemployment (Line 30, Col A)

\$3,000 First Time Home Buyers Account (Line 33, Col B)

Separate Filing Adj. \$2,670 Unemployment in Col A

**Documents:** 

W2 use "MT" for state

Other: Underpayment penalty, line 63

\$3,497 on line 5 of Form W, Worksheet VII \$2,000 Advance Child Care Credit (Col B)

Direct Debit of tax due

RTN #012456778 Acct #34918237

Account type: checking

Amount \$2,392.00 Tax due and penalty

Date 3/16/2004

03 or Fiscal year beginning 2003 and ending First Name and Middle Initial Last Name Social Security No. ۵و De La Halo Test R 400-00-6811 Spouse's Last Name if Different Spouse's First Name and Middle Initial Spouse's Social Security No. Monday Ruby 400-00-6812 test #17 Zip Code+4 MT test #8 Mailing Address 59722 615 Texas Deer Lodge MT Filing Status Check One Sinale Married filing Married and both filing Married and both filing Married filing Fed. Household separate returns on this form separate returns on separate forms spouse is not filing (see instructions) Residency Check One Nonresident Full Year Give date of change State moved to: month Column A (for single Column B (for spouse only **Exemptions** joint, separate, or head of household) when filing separate, and box 3 is checked 65 or Over Blind Regular X .Enter number checked Yourself Enter number checked 1 2. 2. Dependents Dependent's Full Name Dependent's Social Security Number Relationship Do not claim 400-55-3017 Angela Dau 3. Dependents yourself or spous Gabriel 400-55-4017 Son Micheal 400-55-5017 Son 4. Handicapped Dependent 400-55-6017 Dau 2 5. 5. Add lines 1, 2, 3 and 4 (if additional dependents, see instructions)... Total Exemptions Round to nearest dollar Enter amounts reported on federal return 78,800 Wages, salaries, tips, etc. ...... Attach copies of W-2(s) from all states 6. **INCOME REPORTED FROM FEDERAL RETURN** 7. Taxable interest income ....... Attach Federal Schedule if over \$1,500 7. Dividend income ....... Attach Federal Schedule if over \$1,500 8. 8. 11,262 899 9 Net business income (loss) ...... Attach Federal Schedule C or C-EZ 9. 10. Capital gain (or loss) ...... Attach Federal Schedule D 10. 11. 11. Rents, royalties, partnerships, estates, trusts, etc. 12. Attach Federal Schedule E and Form 8582 and all K-1's ..... 12. Total IRA distributions 13b. Taxable amount -Attach all 13b. 13b. Total pensions and annuities a. 14b.Taxable amount 1099R's 14b. 14b. 15b.Taxable amount 15b. Social security benefits 15b. 16. Net farm income (Loss) ...... Attach Federal Schedule F 16. 17. Other income: State refund unemployment\_ 2,670 \_\_ other (specify)\_ 17. 17. 13,932 79,699 18. 18. Adjustments to income. Educator expenses\_\_\_ IRA deduction Student loan interest\_ Tuition and fees\_\_\_ 1/2 SE Tax 1.059 12 Moving Expenses(Attach Form 3903)\_ \_SE Health\_\_\_\_ SE SEP, SIMPLE 19 Penalty on early withdrawal of savings\_ Alimony paid 12,873 79,687 20.Federal adjusted gross income (subtract line 19 from line 18) ...... 20. Note: Line 20 must match your federal adjusted gross income 21. 21. 21. Interest and dividends on state, county, or municipal bonds (Non-Montana) ...... **ADDITIONS** 22. 22. Federal income tax refunds/overpayment (see page 3, line 22 on instructions ) ...... 23. Other additions, (see page 3, line 23 of instructions) 23. 23. Specify 0 24. 24. 24. 12,873 79,687 25 25. Add lines 20 and 24, enter result ..... 26. 26. 26. 27. 27. 27. Interest exclusion for elderly ..... 28. 28. 28. Interest exclusion for savings bonds, etc. Specify\_ Exempt pension & annuity income, (not soc. sec./disability) Attach Worksheet IV, Page 13 29. 29. 29. REDUCTIONS 2,670 30. 30. Unemployment ..... 31. 31. 31. Family Education Savings Account (Attach name and social security number(s) of beneficiary) 32. 32. First Time Home Buyers Account ...... Attach Form FTB 33. 33. 3,000 34. Health care professional loan payment exclusion ..... 34. Other reductions (see page 5, line 35 of instructions). 35. 35. Specify 2,670 3.000 36. 10,203 76,687 37 Subtract line 36 from line 25. Enter here and on line 38, page 2..... 37 37.

2003 Montana Individual Income Tax Return Form 2

ATTACH WITHHOLDING STATEMENTS HERE

100

8	Foi	rm 2 Page 2 - 2003 Social Security Number 400 / 00 / 6811		Column A (for single joint, separate, or head	Column B (for spouse only when filing separate, and box 3 is	$\bigcap$
DEDUCTIONS				of household)	checked	4
LON	38.	Montana adjusted gross income (From line 37)	38.	10,203	76,687	38.
ED		Deductions Check only one				
	39.	(A) Standard deduction: (A) (B) Itemized deductions: (B)	39.	500	16,448	] _
NS	40.	(2)		9,703	60,239	39. 40.
EXEMPTIONS		Exemptions (All filers are entitled to at least one exemption)	> .0.	0,1.00	00,200	1 40.
MP		Multiply \$1,780 times the number of exemptions on line 5		3,560	12,460	41.
X	42.	Taxable income. Subtract line 41 from line 40	····· ⇒ <sup>42.</sup>	6,143	47,779	42./
	(5100)	Nonresidents and Part-Year Residents complete and attach Schedu	les III and I\	/ Form 2A, before proc	eedina	$= \setminus$
		Tax from table below. Non/part year residents enter the amount from line 131, Form	180	3,334	43.	
	44.	2A, Schedule IV. If line 42 is less than zero, enter zero here. Tax on lump sum distributions (see instructions for this line). Attach Federal Form	43. 4972 44.			44.
7	45.	Subtotal—Add lines 43 and 44Subt	.0.2	180	3,334	45.
<u> </u>	46.		46.	400	0.004	46.
Έ		47. Balance—Subtract line 46 from 45 and enter difference (but not less than zero	,	180	3,334	47.
MP(		Recapture investment credit	RIC. 48.			48. 49.
္ပ		For <u>each</u> of the programs below enter any amount you and your spouse want to a				10.
TAX COMPUTATION	00.	Enter totals in boxes (see instructions for details).	continbute.			
		Nongame Wildlife Child Abuse Agriculture in				
	7	Program Prevention Schools Enter total  51. 52. 53. in boxes				50
	54.	51.		180	3,334	50. 54.
					3,514	55.
		56. Montana tax withheldAttach withholding stateme	ents 56.			I
S		57. Payments of 2003 estimated tax and amounts credited from previous year	=		1,273	56. \ 57.
		58. Payment made with extension	58.			58.
YME		59. Elderly Homeowner/ Renter Credit Attach Form 2	2EC 59.		4.070	59.
PAYMENTS AND CREDITS	04	60. Total of lines 56 thru 59			1,273	60.
	61.0	Combine amounts shown on line 60 columns A and B	⇒61.		1,273	61.
		62. If line 61 is larger than line 55 enter the difference. This is your <b>overpay</b>	/ment	62.	]	62.
		63. Amount on line 62 to be applied to 2004 estimate 63		02.		
		64. Enter the amount from line 62 you want refunded to you (refunds more than \$1 Refund Returns: Mail to Dept. of Revenue, PO Box 6577, Helena, MT 59604-68	-77	Dimed December 64.		64.
		If you wish to use direct deposit enter your RTN# and ACCT# below. See in	structions or	n page 6.		
<sup>S</sup> Z <sup>M</sup>	RTN	N# ACCT#		Savings		
PA O		65. If line 55 is larger than line 61 enter tax due (If you owe see instructions for this line), Send your check or money order with payment coupon to: Dept. of Revenue, PO Box	6308, Helena,	<b>Tax Due</b> 65. MT 59604-6308.	2,241	65.
RE YO		If you choose to pay your tax due by credit card visit our website at www.discoveringmontana number here.  See instructions on page 6.	.com/revenue derpayment		454	
U		Check this box if at least 2/3 of your gross income is from farming.	e Worksheet	VII, Schedule W 66	151	66.
		. , _	0 1	lty-See page 2 67 enalty-See page 2. 68	1	67. 68.
	ar	nnuclization mathed (Attach Mantona Form ECT D)		l) per month 69.		69.
		heck here if you do not need state income tax forms and instructions ailed to you next year. Tax forms are also available on the internet.		through 69 70.		70.
				nsion - Check this box and sion(s) to receive a valid		erai
R R		Name, address and telephone number of preparer	See F	Page 2 of instructions for	details.	
EAS	N	May the DOR discuss this return with the preparer shown above? yes upon Question	ons? Please cal	I (406) 444-6900 or TDD (406)	444-2830 for hearing impaire	ed. 🕿
PLEASE SIGN HERE	X	406 437-9876	⊥ X			
0,		Your signature is required Date Daytime telephone numb		Spouse signatu	re Date	
		declare under penalty of false swearing that the information in this r	eturn and a	attachments is true, co	orrect and complete.	
		declare under perialty of false swearing that the information in this re	ctarri aria c	· ·		
	L	If you electronically file, keep this form for your records (d		<u> </u>	·	
	1	If you electronically file, keep this form for your records (d	o not send	d to the Department	·	
		If you electronically file, keep this form for your records (d	o not send	d to the Department	of Revenue).	
		If you electronically file, keep this form for your records (d   Tax Table     Taxable     Taxable   Taxable     Taxable   Taxable     Taxable   Tax	o not send If Taxable II But not	to the Department on the come is: tover Multiply by and 22,200	of Revenue).  I Subtract = Tax\$ 466	
		If you electronically file, keep this form for your records (day	o not send If Taxable II But not 7,800 \$2 2,200 \$3	ncome is: t over Multiply by and 2,200	of Revenue).  d Subtract = Tax\$ 466\$ 688	
		If you electronically file, keep this form for your records (d         Tax Table         If Taxable Income is:         Over         But not over       Multiply by and Subtract =Tax       Over         \$ 0 \$ 2,200	o not send If Taxable II But not 7,800 \$2 2,200 \$3 ,100 \$4 1,500 \$7	to the Department on the come is: tover Multiply by and 22,200	of Revenue).  d Subtract = Tax\$ 466\$ 688\$ 999\$ 1,444	

Example = taxable income \$2,400 x 3% (.03) = \$72 subtract \$22 = \$50 tax

	Page	1 2003 Form 2A	MONTANA					
	Last N	lame and Initial	Social Security Number					
		Schedule I — Itemized Deductions	Column A (For single, joint, separate or head of household)	Column B (For spouse only when filing separate, and box 3 is checked)				
ıtal	71.	Medical insurance premiums not deducted on lines 19, 35 or 75 71. Do not include pre-tax payroll deductions or employer paid premiums.			71.			
Medical & Dental Expenses	72. 73. 74.	Medical expenses. See instructions72. 7,500  Enter 7.5% (.075) of line 38, Form 273. 765 5,752  Subtract line 73 from line 72. If less than zero, enter zero.	Round to nearest dollar					
Ň	75.	Deductible medical and dental expenses		1,748	74. 75.			
Taxes You Paid	76a.	Federal Income Tax (Amounts attributable to self employment tax are not deductible).  2003 federal tax withheld from wages, pensions and annuities. Attach W-2's and 1099's76a.  Federal estimated tax payments made in 2003.  Attach copies of pages 1 and 2 of federal tax return (Form 1040 or 1040A)			70.			
,	77. 78. 79. 80.	Balance of 2002 tax paid in 2003	500	8,878	80.			
Interest You Paid	81. 82. 83.	Real estate personal property taxes	300	283 803	81. 82.			
Other	84. 85. 86. 87.	Deductible investment interestAttach Federal Form 4952 84.  Contributions		3,500	83. 84. 85. 86.			
S	89.	Attach Federal Form 210688. 1,903  Other expenses (list type and amount)						
iscellaneous Jeductions	90. 91. 92.	89. 75 75 Add lines 88 and 89			ı			
W	93.	enter zero		444	92.			
Total Deductions	94. 95a.	Gambling losses (as allowed by federal law)	500	16,656	93. 94. 95a.			
Q	95b. 96.	Enter the amount from line 9 of the Itemized Deduction Worksheet VI on page 14. This is the amount of your unallowable itemized deductions	500	208	95b.			

# 2003 Individual Income Tax Worksheets



Worksheet VI - Itemized Deduction Worksheet		_	Column A	Column B
. Enter the amount from Form 2A, line 95a (Total itemized deductions	s)	1.–	500	16,656
2. Add the amounts on Form 2A, lines 71, 74, 75, 80, 84, 86, 87, and 94		2	500	10,626
Subtract line 2 from line 1. If the result is zero, enter the amount from above on Form 2, line 39. Stop Here. You do not need to complete		6,030		
Multiply amount on line 3 above by 80% (.80)		4,824		
5. Enter the amount from Form 2, line 38		5		76,687
6. Enter \$139,500 (\$69,750 if married filing separately, even if filing or	same form) 6		69,750	
<ol> <li>Subtract line 6 from line 5. (If the result is zero or less, enter the amon Form 2, line 39. <u>Stop Here</u>. You do not need to complete this w</li> </ol>		6,937		
3. Multiply line 7 by 3% (.03)		208		
O. Compare the amounts on lines 4 and 8 above. Enter the smaller of and on Form 2A, line 95b		9		208
Underpayment Penalty of Estimated Tax  n 2003 you must have paid through estimated installments or a combination of withholding and estimated installments the smaller of 1) 90% of your current year's tax liability after credits, or 2) an amount equal to 100% of your previous year's total tax		\$500 or less, do not	line 1. If the result is complete the rest of owe the underpaymen	t
liability. Payments made with extensions are not considered estimated payments. If you do not meet this requirement, you	5.		(line 53 of 2002 Form	
liability. Payments made with extensions are not considered estimated payments. If you do not meet this requirement, you may be subject to an underpayment penalty.	5.		Form 2S). If married	
liability. Payments made with extensions are not considered estimated payments. If you do not meet this requirement, you may be subject to an underpayment penalty.  You may use the short method to figure your penalty only if  you made no estimated tax payments (or your only payments	5.	2 or line 31 on 2002	Form 2S). If married or the total tax.	
liability. Payments made with extensions are not considered estimated payments. If you do not meet this requirement, you may be subject to an underpayment penalty.  You may use the short method to figure your penalty only if	5. 6.	2 or line 31 on 2002 filing separately enter the smaller of Enter the amount from	Form 2S). If married at the total tax.	

A taxpayer who derives at least 2/3 of gross income from farming

or ranching is not subject to estimated tax. Montana law does not provide for a "lookback" to the previous year when determining if a taxpayer is a qualifying farmer or rancher.

#### **Short Method**

- 1. Enter your 2003 tax from line 55 on Form 2 or line 31 on Form 2S (total liability if married filing separately on the same form). 2. Enter 90% of line 1 above.
- 3. Enter your total withholding from line 56, amount credited from prior year's tax included in line 57, and the elderly homeowner/renter credit from line 59 on Form 2 or line 34 on Form 2S. (If married filing separately enter the total payments).

- You do not owe the underpayment penalty.
- 9. Multiply line 8 by .07980 and enter the result. .
- 10. If the amount on line 8 was paid on or after April 15, 2004, enter zero. If the amount on line 8 was paid before April 15, 2004, multiply amount on line 8 x number of days paid before April 15, 2004 x .0003288.
- 11. Underpayment interest penalty. Subtract line 10 from line 9. Enter the results here and on line 66 of Form 2 or line 37 of Form 2S or on line 51 of Form FID-3.



# **Underpayment of Estimated Tax** by Individuals and Fiduciaries

MONTANA EST-P Rev. 8-03

15-30-241. MCA

	Nema De La Halo Test R	241, WOA	SSN	400-00-6811		
	Monday Puby			400-00-6812		
Par	rt I Required Annual Payment — All filers must complete this		_ 0011_			
1.	Enter 2003 tax from line 54 of Form 2 or line 31 of Form 2S or	•				
١.	(enter total liability of both spouses if married filing separate of			1	3,5	14
2.	Multiply line 1 by 90% (.90).					
3.	Enter Montana tax withheld and/or the Elderly Homeowner/Re	enter credit for 2003		3	1,2	73
4.	Subtract line 3 from line 1. If less than \$500, stop here			4	2,24	41
5.	Enter 2002 tax (Line 54 of Form 2 or line 31 of Form 2S or line				0.44	97
6.	Required annual payment. Enter the smaller of line 2 or line 5 or more than line 6, stop here, no penalty is due	5. If line 3 is equal to		6	3,10	63
	rt II Short Method — Use this method if you did not make esti es and in four equal amounts. Otherwise, use the regular meth	mated tax payments o				on the due
7.	Enter the amount, if any, from line 3 above		7	1,273		
8.	Enter the total amount, if any, of estimated tax payments made amounts credited from prior years.		8	0		
9.	Add lines 7 and 8.			9	1,2	73
10.	Total underpayment for year. Subtract line 9 from line 6. If the stop here, you do not owe underpayment interest penalty			10	,1,89	90
11.	Multiply line 10 by .07980 and enter the result.					
	If the amount on line 10 was paid on or after 4/15/2004, enter If the amount on line 10 was paid before 4/15/2004, multiply a number of days paid before 4/15/2004 x .0003288	zero. mount on line 10 by				
13.	<b>Underpayment interest penalty.</b> Subtract line 12 from line 1 here and on line 66 of Form 2 or line 37 of Form 2S or on line			Total Due: 13	1	51
Par	rt III Regular Method — Use this method if you made paymen	ts of unequal amounts	. The du	ie dates shown are f	or calend	ar year
	payers. Adjust these dates accordingly for fiscal year returns.	A	В	С		Ď
	mplete lines 14 through 17 in each column before going ine 18.	4/15/03	6/15/0	9/15/03		1/15/04
14.	Divide line 6 by four (4) and enter the result in each column					
15.	Enter amount of estimated tax paid on each date 15.					
16.	Enter one-fourth of the amount on line 3 in each column 16.					
17.	Add lines 15 and 16. This is your total payment17.					
Cor	mplete lines 18 through 27 of one column before going to the no	ext column				
18.	Enter amount, if any, from line 25 of previous column 18.					
19.	Add lines 17 and 18 19.					
20.	Enter amount on line 24 of the previous column 20.					
21.	Subtract line 20 from line 19. If zero or less, enter zero. For column A only, enter the amount from line 1721.					
22.	If the amount on line 21 is zero, subtract line 19 from line 20. Otherwise, enter zero					
23.	Underpayment. If line 14 is equal to or greater than line 21, subtract line 21 from line 14. Then go to line 24. Otherwise, go to line 25					
24.	Add lines 22 and 23. Enter here, then go to line 27 24.					
25.	Overpayment. If line 21 is more than line 14, subtract line 14 from line 21. Then go to line 18 of next column 25.					
	3			<del></del>	-	
26.	Number of days until next estimated payment date 26.	61	92	122		90
	-		92	122		90

Part IV Annualized Income Installment Method Worksheet — Complete lines 29 through 53 only if computing installments using annualized income installment method.

Complete each column beginning with Column A through line 53 before completing the next column.

			Α	В	С	D
			1/1/03 to 3/31/03	1/1/03 to 5/31/03	1/1/03 to 8/31/03	1/1/03 to 12/31/03
29.	Montana adjusted gross income for the period	29.				
30.	Annualization amounts	30.	4	2.4	1.5	1
31.	Annualized income. Multiply line 29 by line 30	31.				
32.	*Enter your itemized deductions for the period shown	32.				
33.	Annualization amounts	33.	4	2.4	1.5	1
34.	Multiply line 32 by line 33	34.				
35.	**Enter the full amount of your standard deduction	35.				
36.	Enter the larger of line 34 or line 35	36.				
37.	Subtract line 36 from line 31.	37.				
38.	Multiply \$1,780 by number of exemptions	38.				
39.	Subtract line 38 from line 37.	39.				
40.	Figure the tax on the amount on line 39 using the tax table below.	40.				
41.	Tax on lump sum distributions	41.				
42.	Add lines 40 and 41	42.				
43.	Enter tax credits for each period	43.				
44.	Subtract line 43 from line 42.	44.				
45.	Applicable percentage.	45.	22.5%	45%	67.5%	90%
46.	Multiply line 44 by line 45	46.				
47.	Add the amounts in all preceding columns of line 53	47.	-0-			
48.	Subtract line 47 from line 46. If less than zero enter zero. $\ldots$	48.				
49.	Divide line 6, Part I of this form, by four (4) and enter the result in each column	49.				
50.	Enter the amount from line 52 of the preceding column of this worksheet.	50.				
51.	Add lines 49 and 50 in each column and enter the result.					
52.	If line 51 is more than line 47, subtract line 48 from line 51. Otherwise, enter zero.	51.				
53.	Enter the smaller of line 48 or line 51 here and on line 14 of Part III.	52.				
		53.				

<sup>\*</sup>If you do not itemize deductions, enter zero.

Single or separate: No less than \$1,480; no more than \$3,330 Married or head of household: No less than \$2,960; no more than \$6,660

#### **Tax Table**

If Taxable Income is:					If Taxable Income is:												
Over		But not over		But not over Multiply by		and Subtract = 7		= Tax Over		Over	over But not over		r Multiply by		and Subtract		=Tax
\$	0	\$	2,200	X	2 %	\$	0		\$	17,800	\$	22,200	Χ	7 %	\$	466	
\$	2,200	\$	4,400	Χ	3 %	\$	22		\$	22,200	\$	31,100	Χ	8 %	\$	688	
\$	4,400	\$	8,900	X	4 %	\$	66		\$	31,100	\$	44,500	Χ	9 %	\$	999	
\$	8,900	\$	13,300	X	5 %	\$	155		\$	44,500	\$	77,800	Χ	10 %	\$	1,444	
\$	13,300	\$	17,800	Χ	6 %	\$	288		\$	77,800			Χ	11 %	\$	2,222	

Example = taxable income  $$2,400 \times 3\% (.03) = $72 \text{ subtract } $22 = $50 \text{ tax}$ 

<sup>\*\*</sup> The standard deduction is 20% (.20) of line 31, subject to the following limitations: